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CITY OF KENMORE, WA PERMIT APPLICATION



18120 68th Ave NE, Kenmore, WA 98028

425-398-8900

www.kenmorewa.gov

			Permit #:
Permit Type:			
Project Name:			STAFF USE AREA
Project Description:			
			Date stamp
Property Address:			
Floor and Suite #:			
Parcel Number:			
Legal Description:			
Applicant:		Phone:	
Address:			
e-mail address:			
Property Owner:			
Address:			
e-mail address:			
Contractor's Company Name:			
Address:			
e-mail address:			
	ation Date: _		State UBI#:
Contact Person:		Phone:	
Address:			
e-mail address:			
Interim Construction Loan Lender OR Payment Bond Issue			
Address:		City, St, Zip:	
Phone:		Fax:	
For projects costing more than \$5,000; If not available at time of application the applica	nt shall so state	and provide as soon	as the information is obtained.(KMC 15.30.225.B.4.b)
All provisions of laws and ordinances governing this type of work will be complied with. I certify under penalty of perjury that the information provided on this application is true and correct and, further that I am authorized by the owner of the above premises to perform the work for which the permit application is made. I further agree to hold harmless the City of Kenmore as to any claim (including costs, expenses, and attorney's fees incurred in investigation and defense of such claim), which may be made by any person, including the undersigned, and filed against the City of Kenmore, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information supplied to the City as part of this application.			
OWNER/APPLICANT:		Date:	
I hereby authorize the City representatives to inspect my property Monday-Friday between the hours of 8:00 a.m. and 5:00 p.m. during this permit application process for verifying site conditions.			